



Little Traverse Bay Bands of Odawa Indians
Michelle Chingwa Education Assistance Scholarship
Enrollment Verification Form

In order for our Tribal Education Department to fully award this student, it is required that the student verify their enrollment. We appreciate your assistance. Please have a **school official** complete the following information and mail the form to:

LTBB Education Department
Attn: Melissa Colby
7500 Odawa Circle
Harbor Springs, MI 49740

PLEASE NOTE THAT WE DO NOT ACCEPT FAXED FORMS

Completed By Student { I _____ give permission for the appropriate school
(PRINTED name of student and Student ID Number)
official at _____ to complete the
(Institution)
following and send it to the LTBB Education Department.

(Signature of student)

Please note this form will not be accepted before the 100% drop/add period is over. It will be returned to the student.

Completed By Enrollment Officer { Current semester the student is enrolled in: **Fall / Winter / Spring / Summer**
Current number of credit hours the student is enrolled in: _____ (please include exact number as our scholarship depends on it)

(Date of Verification)

(Authorizing Enrollment Signature)

(Printed Name)

(Title)

(Official Seal)